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CONFIRMATION NO. 6848

<b>SERIAL NUMBER</b> 10/661,238	<b>FILING or 371(c) DATE</b> 09/12/2003 <b>RULE</b>	<b>CLASS</b> 602	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> 920522-94798		
<b>APPLICANTS</b> Rene Verdonk, Gent, BELGIUM; Lieven De Wilde, Gent, BELGIUM; Johan Berte, Kersbeek-Miskom, BELGIUM; <b>** CONTINUING DATA *****</b> <i>SA</i> <b>** FOREIGN APPLICATIONS *****</b> <i>YES SA</i> EUROPEAN PATENT OFFICE (EPO) 02447173.2 09/12/2002 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 12/04/2003						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/SHUMAYA B ALI/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> BELGIUM	<b>SHEETS DRAWINGS</b> 6	<b>TOTAL CLAIMS</b> 18 <i>10 SA</i>	<b>INDEPENDENT CLAIMS</b> 1 <i>3 SA</i>
<b>ADDRESS</b> BARNES & THORNBURG LLP P.O. BOX 2786 CHICAGO, IL 60690-2786 UNITED STATES						
<b>TITLE</b> Orthopedic arm and shoulder brace						
<b>FILING FEE RECEIVED</b> 465	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		